

# History of the Center

*Expert and Compassionate Care for Deployment Veterans—Resources for Clinicians*

## Gulf War Illness

The Deployment Health Clinical Center (DHCC), situated at Walter Reed Army Medical Center, began as the Gulf War Health Center in 1994. Shortly after the 1991 Gulf War, some of the 700,000 service members deployed during that conflict began to present for care with symptoms they believed were related to their deployment. The unclear etiology of symptoms, in some cases, presented a challenge for both military providers and affected personnel experiencing chronic pain. The Comprehensive Clinical Evaluation Program (CCEP) was implemented in response to these concerns, and the Gulf War Health Center developed the CCEP's intensive tertiary treatment component to treat veterans who remained symptomatic after appropriate medical care. This tertiary treatment became the Specialized Care Program. More than 100 cycles of this three-week, multi-disciplinary program have been delivered to deployment veterans. In response to the increased operational tempo associated with Operations Iraqi Freedom and Enduring Freedom, DHCC has developed a new program, the Specialized Care Program Track II. This program is designed to treat service members with combat stress, posttraumatic stress disorder (PTSD), or difficulties re-adjusting to life in the U.S. The program is based on the best available evidence regarding effective treatments for PTSD and employs the successful therapeutic milieu of the Specialized Care Program for medically unexplained physical symptoms (now called Track I).

## Deployment Health

The 1999 Strom Thurmond National Defense Authorization Act established three centers of excellence devoted to deployment health. The Gulf War Health Center transitioned to the Deployment Health Clinical Center, the clinical component of these centers of excellence. DHCC's mission was expanded to include not only clinical care of deployment veterans, but deployment-related health research, and training, education, and communication responsibilities as well. DHCC also added risk communication, clinical and health services research, and epidemiological expertise to its staff.

DHCC's research program began with a focus on illnesses associated with the 1991 Gulf War. DHCC now has a research portfolio comprising a dozen demographic and epidemiology projects, nine health services research projects, and clinical trials. Major focus areas for DHCC research include post-war syndromes, especially illness related to the 1991 Gulf War, medically unexplained physical symptoms, and posttraumatic stress disorder that occurs subsequent to combat, sexual assault, or terrorist attack. Each year DHCC staff publishes more than 20 articles in peer-reviewed publications as well as giving presentations world-wide.

DHCC launched its Web site, PDHealth.mil, in January 2001, redesigning it in May 2002. The Web site receives more than 110,000 hits per month. DHCC risk communication outreach was enhanced in 2002 with daily distribution of the electronic *Deployment Health News*, currently sent to more than 1000 subscribers. DHCC began the Deployment Health Guest Lecturer series at Walter Reed in 2003 and began providing a Deployment Healthcare Track at the Seventh Annual Force Health Protection Conference in 2004.

## **Post-Deployment Health Clinical Practice Guidelines**

DHCC was involved in the creation of the DoD/VA Post-Deployment Health Evaluation and Management Clinical Practice Guideline (PDH-CPG). The guideline was completed in 2001 following Institute of Medicine recommendations to incorporate deployment healthcare into primary care and to regularly screen all military beneficiaries. The guideline was launched in 2002 and revitalized in 2004. DHCC supports the rollout of this guideline through video, Web-based, and desktop tools, the DHCC Provider Helpline, and visits to military treatment facilities by the Staff Training and Assistance Team. DHCC also supports the DoD/VA guidelines for primary-care based detection and treatment of depression, PTSD, and medically unexplained symptoms through staff assistance, training programs, and research projects. DHCC helped redesign the DD Form 2796 (Post-Deployment Health Assessment) and the assessment process for re-deploying veterans at the beginning of the Iraq War, and the Center continues to provide support for clinical management of and clinical resources about emerging health concerns for current operations.

DHCC remains committed to providing compassionate state-of-the-art care for America's deployment veterans while giving their providers the research, resources, and tools they need to do the same.